



Department of
Medicaid

Next Generation Medicaid Program – February 1 Launch

Submitting Prior Authorizations

Provider Journey Maps

January 2023

February 1 Launch – Submitting Prior Authorizations via the PNM Module | Overview

Purpose and Considerations

- Purpose
 - » Instruct providers on how to submit a fee-for-service (FFS) prior authorization request via the Provider Network Management (PNM) module, which redirects to the Medicaid Information Technology System (MITS).
- Considerations
 - » **All managed care prior authorization requests will continue to be sent directly to the members' Managed Care Entity (MCE) until further notice. Providers will contact each MCE directly to obtain the status of a submitted prior authorization.**
 - » Providers submitting a FFS prior authorization request must have OH|ID credentials (username and password).
 - » This journey map is only for FFS prior authorizations. Providers are to submit managed care prior authorization requests directly to MCEs.

February 1 Launch – Submitting Prior Authorizations in the PNM Module | Overview (cont.)

Purpose and Considerations

- Common Acronyms
 - » FFS – Fee-for-service
 - » IOP – Innovate Ohio Platform
 - » MCE – Managed Care Entity
 - » MITS – Medicaid Information Technology System
 - » PNM – Provider Network Management
- Resources
 - » For detailed step-by-step instructions, please utilize the User Guides available at <https://ohiopnm.myabsorb.com>.
 - Users will need an enrollment key to create an account and access training guides. Contact ohiotrainingteam@maximus.com for assistance.

Submitting a Prior Authorization via PNM

February 1, 2023 Launch

Submitting a Prior Authorization in PNM

February 1 Launch – Fee-for-service only. Submit managed care prior authorizations directly to MCEs.

WHO: Ohio Medicaid providers

WHEN: Process effective with February 1, 2023 launch of the Next Generation program

Note: This is the same process as implemented on 10/1/2022.



1. Check member eligibility and frequency requirements in the Provider Network Management (PNM) module in advance of submitting a prior authorization following the steps in the “Member Eligibility Verification in PNM” Provider Journey Map.

2. Navigate to the Provider Network Management (PNM) module and log in using your OH|ID credentials (username and password). If the provider does not have OH|ID credentials, they must first enroll in PNM.

3. Select the provider submitting the prior authorization and using the “Self Service” portal located on the bottom left side of the Provider Management home page select “Prior Authorization.” *You will be routed to the MITS Portal to complete your prior authorization submission.*



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Submitting a Prior Authorization: Routed to MITS

February 1 Launch – Fee-for-service only. Submit managed care prior authorizations directly to MCEs.

WHO: Ohio Medicaid providers
WHEN: Process effective with
February 1, 2023 launch of the
Next Generation program

The screenshot shows the Ohio Department of Medicaid logo at the top left. Below it is a search bar with a 'Search' button. A navigation bar contains the following items: 'Providers', 'Account', 'Trading Partners', and 'Prior Authorization'. The 'Prior Authorization' item is highlighted with a dashed red border. Below this bar, there are two buttons: 'Search' and 'New'. A mouse cursor is pointing at the 'New' button, which is also highlighted with a red border.

4. Once in the MITS Provider Portal, select the “Prior Authorization” option in the heading menu bar. Select “New” to submit a new prior authorization from the list of options displayed.



The screenshot shows the 'Base Information' form for a Prior Authorization. The form has a blue header with the text 'Base Information'. Below the header, there are several fields: '*Assignment' (44 - CHIROPRACTIC/ACUPUNCTURE), '*Authorization Type' (Prior Authorization), '*Medicaid Billing Number', '*Date of Birth', 'Last Name', 'First Name, MI', 'Ordering Provider NPI', and 'Ordering Provider Name'. There are also fields for '*Service Provider', 'Service Provider Name', '*Contact Name', '*Contact Number/Ext', 'Special Indicator', 'LTCF Discharge Date', and 'Admission Date'. At the bottom of the form, there is a 'next' button highlighted with a red box.

5. Provide the required information in each field. Some fields will require the use of a dropdown menu to select from a list of pre-populated options. Select the “Next” button at the bottom of the screen. If any information is incomplete or contains errors, red exclamation points will indicate fields needing correction before proceeding.

Submitting a Prior Authorization: Routed to MITS (cont.)

February 1 Launch – Fee-for-service only. Submit managed care prior authorizations directly to MCEs.

WHO: Ohio Medicaid providers

WHEN: Process effective with February 1, 2023 launch of the Next Generation program

Ohio

Department of Medicaid

Search

Providers

Account

Trading Partners

Prior Authorization

Base Information > Line Item

Provider

Line Item

Line Item	Units	Requested Dollars	Authorized Units	Authorized Dollars	Service Type Code	Service Code	Code Thru	Status
A 01	1	\$0.00	0	\$0.00	HCPCS Procedure			PENDING ADOTL INFO

Select row above to update -or- click Add button below.

delete

add

Line Item

01

*Service Type Code

HCPCS Procedure

*Requested Eff Date

*Requested Units

*Requested End Date

*Requested Dollars

*Procedure

[Search]

Modifier 1

[Search]

Modifier 2

[Search]

Modifier 3

[Search]

Modifier 4

[Search]

6. Under the “Line Item” section, use the “Add” or “Delete” buttons in the top left to enter the required information for each service and populate the fields below. Once all line items are entered, select “Next” to continue.



Ohio

Department of Medicaid

Search

Providers

Account

Trading Partners

Prior Authorization

Base Information > Line Item > Provider Notes

Provider 1407854771 NPI - TOLEDO HOSPITAL

Provider Notes

*** No rows found ***

Click Add button below.

delete

add

previous

next

7. Under the “Provider Notes” section, add any provider notes if relevant and select “Next.”

Submitting a Prior Authorization: Routed to MITS (cont.)

February 1 Launch – Fee-for-service only. Submit managed care prior authorizations directly to MCEs.

WHO: Ohio Medicaid providers
WHEN: Process effective with February 1, 2023 launch of the Next Generation program

The screenshot shows the Ohio Department of Medicaid web portal. At the top is the Ohio Department of Medicaid logo and a search bar. Below the logo is a navigation bar with tabs: Providers, Account, Trading Partners, and Prior Authorization (which is highlighted with a red dashed border). Under the Prior Authorization tab, there is an 'Attachments' section. This section has a table with columns 'Type of Document' and 'Transmission Type'. Below the table are 'delete' and 'add' buttons. The 'add' button is highlighted with a red box. Below the buttons are three input fields: '*Type of Document' (a dropdown menu), '*Transmission Type' (a dropdown menu), and '*Description' (a text box). These three fields are grouped together and highlighted with a red box.



8. To add an attachment, select “Add” and complete the list of fields indicating the “Type of Document,” “Transmission Type,” and “Description.” You will receive a “Upload Success” status for each attachment.

9. When you have finished entering the prior authorization information, select “Submit” at the bottom of the page.



Checking Prior Authorization Status

February 1, 2023 Launch

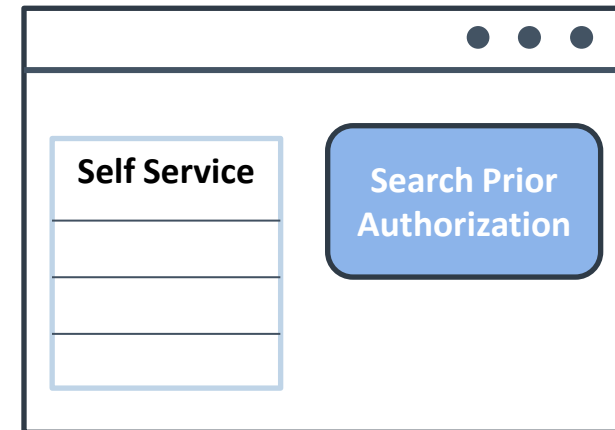
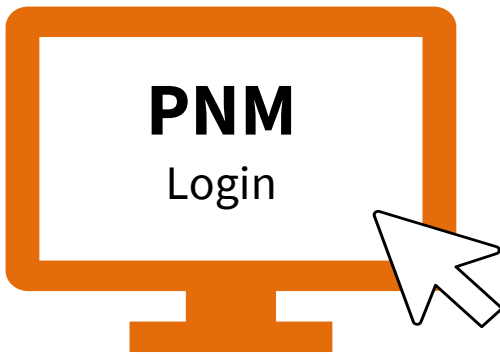
Checking Prior Authorization Status (cont.)

February 1 Launch – Fee-for-service only. Submit managed care prior authorizations directly to MCEs.

WHO: Ohio Medicaid providers

WHEN: Process effective with February 1, 2023 launch of the Next Generation program

Note: This is the same process as implemented on 10/1/2022.



1. Navigate to the [Provider Network Management \(PNM\) module](#) and log in using your OH|ID credentials (username and password). If the provider does not have OH|ID credentials, they must first [enroll in PNM](#).

2. Under the “Self Service” dropdown on the left side of the screen, click “Search Prior Authorization.” *You will be routed to the MITS Portal to see your prior authorization submission.*



Continue to next slide



Checking Prior Authorization Status (cont.)

February 1 Launch – Fee-for-service only. Submit managed care prior authorizations directly to MCEs.

WHO: Ohio Medicaid providers
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Ohio Department of Medicaid

Providers Account Trading Partners **Prior Authorization**

Prior Authorizations Requiring Additional Information

*** No rows found ***

Prior Authorizations Pending Review

*** No rows found ***

Prior Authorizations Recently Finalized

Prior Authorization	Date Submitted	Review Date	Medicaid Billing Number
2022080101	03/21/2022	04/21/2022	484443520804
2022080094	03/21/2022	04/21/2022	910002127601
2022080088	03/21/2022	04/21/2022	725017234803



Ohio Department of Medicaid

Providers Account Trading Partners **Prior Authorization**

search new Search New

Prior Authorization Search: 1407854771 NPI - TOLEDO HOSPITAL

Prior Authorization [] Medicaid Billing Number []

Submission Date [] Date Of Birth []

Inpatient Procedure [Search] Name [Search]

Procedure [Search] Procedure Code Thru [Search]

Revenue Code [Search] Revenue Code Thru [Search]

Status [Search] Diagnosis [Search]

Assignment Code [Search]

Ordering Provider NPI [Search]

Records 20

search clear add

3. Once in the MITS Provider Portal, select the “Prior Authorization” option in the heading menu bar. It will display a list of prior authorizations requiring additional information, pending review, and those that have been finalized.

4. To search for a specific prior authorization, hover over the “Prior Authorization” button and select “Search.” Enter the prior authorization number or Medicaid Billing Number if known and select “Search.”

Checking Prior Authorization Status (cont.)

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Ohio

Department of Medicaid

Search

Providers

Account

Trading Partners

Prior Authorization

search

new

Prior Authorization	Medicaid Billing Number	Last Name	First Name	PA Status	Assignment	Service Type Code	Service Code	Service Code Thru	Primary Diagnosis	Auth Eff	Auth End	Auth Units	Auth Dollars
2019176031				R	37	Revenue Code	160		F259	05/24/2019	05/24/2019	1	0



Ohio

Department of Medicaid

Search

Providers

Account

Trading Partners

Prior Authorization

search

new

Base Information

2019176031

Prior Authorization

Assignment

PSYCHIATRIC INPATIENT

*Authorization Type

Pre-certification - Hospital

Medicaid Billing Number

2019176031

Date of Birth

Last Name

First Name, MI

Ordering Provider NPI

Ordering Provider Name

Service Provider

NPI [Search]

Service Provider Name

*Contact Name

*Contact Number/Ext

Special Indicator

LTCF Discharge Date

Admission Date

05/24/2019

Diagnosis Codes

Primary Diagnosis is sequence number 1.

Sequence

ICD Version

Diagnosis

Description

1

10

F259

SCHIZOAFFECTIVE DISORDER, UNSPECIFIED

Line Item

Line Item	Units	Requested	Authorized	Authorized	Service	Status		
Line Item	Units	Requested Dollars	Units	Dollars	Service Type Code	Service Code	Code Thru	Status
01	1	\$0.00	1	\$0.00	Revenue Code	160		APPROVED RETROACTIVE

5. Alternatively, if the prior authorization number or Medicaid Billing Number is unknown, click the “Search” button in the bottom left corner and MITS will display a list of all prior authorizations associated with your profile. The fifth column displays the “Status” of the claim.

6. To view all details for a prior authorization, click on the prior authorization and review the initial submission details, including the status.

